

SIGNATURE OF APPLICANT:

SALTWATER CHARTER VESSEL LICENSE

SOUTH CAROLINA DEPARTMENT OF NATURAL RESOURCES

ATT: LICENSE OFFICE

PO BOX 12559 CHARLESTON, SC 29422-2559

(843)953-9301

For Office Use:

This is a Non-transferable	e license for a Vesse	I			
SSN or FEIN		DL #	State_		
Name or Business					
Address				Li	cense Number:
City		_ State	Zip		
Work ()	County of	Residence_		Gender	Race
Email Address					
Vessel's Name			Hull ID #		
State Reg. #		OR	USCG Doc #		Tonnage
Length	Ft	In	Max # Anglers		
Will the fish caught be s Will the vessel be at a s		No ess? Ye	es or No		
This Boat is ☐ Traile	red or □ataMa	rina			
Marina					
Address					
City			State	Zip	
Captain's Name					
Addrose					
City			State	Zip	
Phone Number	er USCG Capt. License #				
Please Indicate Type	of Vessel License	Needed:	7-49 Pa	ess Passengers assengers More Passengers Boat	\$150 \$250 \$350 \$40
I HEREBY DO DECLARE THE ELIGIBLE TO APPLY FOR, HO			——— TAND THAT PERSONS W		·

REMITTANCE: BY MAIL - CHECK OR MONEY ORDER (NO OUT OF STATE CHECKS ACCEPTED) NO REFUNDS

DATE: